**GREAT BRITAIN** 

DECLARATION AND P ER OF ATTORNEY

Sole/Joint Attorney's Docket No: PHB34314US

No

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name

9922575.7

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below)

	O COMMUNICATION SYSTEM	d for which a patent is sought on the			
the spec	cification of which (check one)				
図	is attached hereto				
	was filed on	as Application S	Serial No:	and	was amended on
amenda I acknow Regulati I hereby below a	nent referred to above. wledge the duty to disclose infor ions, §1.56 (a). y claim foreign priority benefits u	d understand the contents of the mation which is material to the exampler Title 35, United States Code, foreign application for patent or involved PRIOR FOREIGN	amination of this application in ac §119 of any foreign application(s entor's certificate having a filing da	ccordance with Title 37	7, Code of Federa
	COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIOI Claimed 35 U.S.	Under
GREA	AT BRITAIN	9900910.2	16-01-1999	Yes X	No
GREA	T BRITAIN	9911622.0	20-05-1999	Yes X	No
CDEA	T DDITAIN	0015560.0	02-07-1999	Yes X	No

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35 United States Code §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

24-09-1999

**PRIOR UNITED STATES APPLICATION(S)** 

APPLICATION SERIAL NUMBER	FILING DATE	STATUS (PATENTED, PENDING, ABANDONED)					
AFFEIGATION SERVAL HOMBER	TIENG DATE						
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (list name and registration number)

Jack E. Haken, Reg. No 26,902 Algy Tamoshunas, Reg. No 27,677

SEND CORRESPONDENCE TO: Corporate Patent Counsel U.S. Philips Corporation 580 White Plains Road Tarrytown, New York 10591

DIRECT TELEPHONE CALLS TO: (Name and telephone number)

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Dated: 26 Nou	99	Inventor's Signature:	J Mark
FULL NAME OF INVENTOR:	Last name MOULSLEY	First Name: Timothy	Middle Name:  J. /
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W. Balle in

Dated: Inventor's Signature: NOVENBER 1999 First Name: FULL NAME OF INVENTOR: Last name HUNT **Bernard** Country of Citizenship: RESIDENCE & CITIZENSHIP State or Foreign Country: REDHILL ENGLAND **GREAT BRITAIN** POST OFFICE ADDRESS State or Country: Zip Code: Street & No: FLAT I, RANMORE REDHILL SURREY UK RMI 6MS MOUSE, 17 St. JOHN'S TERROLE ROSO Inventor's Signature: Dated: First Name: Middle Name: FULL NAME OF INVENTOR: \* Last name RESIDENCE & CITIZENSHIP City State or Foreign Country: Country of Citizenship: POST OFFICE ADDRESS\* City: State or Country: Zip Code: Street & No: Dated: Inventor's Signature: First Name: Middle Name: FULL NAME OF INVENTOR: Last name Country of Citizenship: RESIDENCE & CITIZENSHIP State or Foreign Country: Zip Code: POST OFFICE ADDRESS Street & No: City: State or Country: Inventor's Signature: Dated: FULL NAME OF INVENTOR First Name: Middle Name: Last name State or Foreign Country: Country of Citizenship: RESIDENCE & CITIZENSHIP City Zip Code: POST OFFICE ADDRESS Street & No: City: State or Country: Inventor's Signature: Dated: Middle Name: FULL NAME OF INVENTOR: Last name First Name: State or Foreign Country: Country of Citizenship: RESIDENCE & CITIZENSHIP City State or Country: Zip Code: POST OFFICE ADDRESS Street & No: City: Inventor's Signature: Dated: FULL NAME OF INVENTOR: First Name: Middle Name: Last name Country of Citizenship: RESIDENCE & CITIZENSHIP State or Foreign Country: POST OFFICE ADDRESS City: State or Country: Zip Code: Street & No: Dated: Inventor's Signature: Middle Name: FULL NAME OF INVENTOR: First Name: Last name Country of Citizenship: RESIDENCE & CITIZENSHIP City State or Foreign Country: City: State or Country: Zip Code: POST OFFICE ADDRESS Street & No: Inventor's Signature: Dated: First Name: Middle Name: FULL NAME OF INVENTOR: Last name State or Foreign Country: Country of Citizenship: RESIDENCE & CITIZENSHIP Zip Code: State or Country: POST OFFICE ADDRESS Street & No: City: Inventor's Signature: Dated: Middle Name: FULL NAME OF INVENTOR Last name First Name: RESIDENCE & CITIZENSHIP State or Foreign Country: Country of Citizenship: City Zip Code: State or Country: City:

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